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FEC FORM 2

STATEMENT OF CANDIDACY

 (a) Name of Candidate (in full) 									
Olean One's									
Olson, Craig, , ,	ПО:- 1 "	ا ا ماماس-	hane:!		0.0	tele EEO LL	mtifingti *	lumah a n	
(b) Address (number and street) PO Box 247	PO Box 247					Candidate's FEC Identification Number H8ME02177			
(c) City, State, and ZIP Code					3. Is This		ew	Amended	
Islesboro		ME	04848	3	Statem	nent 🗶 (N	N) OR	(A)	
4. Party Affiliation	5. Office Sought			6. State & Dist		date			
DEMOCRATIC PARTY	House			ME	02				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
NOTE: This designation should be	filed with the appropris	ate office lis	sted in th	ne instructions.					
(a) Name of Committee (in full)									
Craig Olson for Cor	igress								
(b) Address (number and street) PO Box 247									
(c) City, State, and ZIP Code									
Islesboro				ME	04848	}			
151552515									
DE	SIGNATION O	_	_	_		TEES			
	(Includi	ng Joint Fu	ndraisin	g Representativ	es)				
8. I hereby authorize the following nar candidacy.	ned committee, which	is NOT my	/ principa	al campaign con	nmittee, to re	ceive and ex	pend funds	on behalf of my	
•		campaign (committe						
NOTE: This designation should be	filed with the principal	ournpuigir .	COMMITTEE	ee.					
	filed with the principal			ee. 					
NOTE: This designation should be (a) Name of Committee (in full)	filed with the principal		COMMITTEE	ee. 					
	filed with the principal	Campaign		ee. 					
	filed with the principal	- Campaign		96.					
(a) Name of Committee (in full)	filed with the principal	oampaign v		96.					
(a) Name of Committee (in full) (b) Address (number and street)	filed with the principal	Campaign		96.					
(a) Name of Committee (in full)	filed with the principal	ouripuigi.		96.					
(a) Name of Committee (in full) (b) Address (number and street)	filed with the principal	ouripaign.		96.					
(a) Name of Committee (in full) (b) Address (number and street)	filed with the principal	ouripaign.		96.					
(a) Name of Committee (in full) (b) Address (number and street)					and belief it is	true, correct	t and compl	lete.	
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code					and belief it is	true, correct	t and compl	lete.	
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example of Candidate			best of I	my knowledge a	Date		t and compl	lete.	
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code			best of I				t and compl	lete.	
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example of Candidate			best of I	my knowledge a	Date		t and compl	lete.	
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example of Candidate	amined this Statement	and to the	best of I	my knowledge a	Date 08/17/20	17			
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example of Candidate Olson, Craig, , ,	amined this Statement	and to the	best of I	my knowledge a	Date 08/17/20	17			
(a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code I certify that I have example of Candidate Olson, Craig, , ,	amined this Statement	and to the	best of I	my knowledge a	Date 08/17/20	17			

FEC FORM 2 (REV. 02/2009)